

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	1501
FORMALITY REVIEW	HA	858	01-08-01
RESPONSE FORMALITY REVIEW	T2	50947	05/14/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	1/24/03
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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